This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

				Return completed workbook	
	ENT OF ACCOUNT	FOR COPYRIGE	IT OFFICE USE ONLY	by email to:	
	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov	
Cable Syste	ms (Short Form)		ć	For additional information,	
Conoral instru	ctions are located		\$	contact the U.S. Copyright	
	of this workbook	2/24/21	ALLOCATION NUMBER	Office Licensing Division at: Tel: (202) 707-8150	
				-	
Α					
	ACCOUNTING PERIOD COVERED	BT INIS STATEMENT: (T	t t t/(Period))		
		I			
	2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		
		-			
		Barcode Data Filing Period (optional	- see instructions)		
Accounting Period					
_	Instructions: Give the full legal name of the owner of tl	he cable system. If the owner is a subs	sidiary of another corporation, give the full o	corporate	
B	title of the subsidiary, not that of the pare	ent corporation.			
Owner	List any other name or names under whic	h the owner conducts the business of	the cable system.		
	5		the last day of the accounting period should	d submit a	
	single statement of account and royalty fe	ee payment covering the entire accour	nting period.	7025	
	Check here if this is the system's first filing	g. If not, enter the system's ID number	r assigned by the Licensing Division.	7035	
1					

		single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Zito Midwest LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		Zito Media
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		PO Box 665 (Number, street, rural route, apartment, or suite number)
		Coudersport, PA 16915 (City, town, state, zip)
С		UCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1	IDENTIFICATION OF CABLE SYSTEM:
	1	Zito Media - Lott
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito Midwest LLC	SYSTEM ID# 7035
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated cor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings.	y" is the same as a "community unit" as defined in FCC rules: nmunities within unincorporated areas and including single,
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile hidentified city.	ome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	Lott	ТХ
Community		
Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					FORM SA1	
Name	Zito Midwest LLC		•						70
	SECONDARY TRANSMISSION				res				
E	In General: The information in s					y transmission	service of	the cable	
	system, that is, the retransmission								
Secondary	about other services (including p						those exist	ting on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						hla svetar	broken	
scribers and	down by categories of secondar	•					-		
Rates	each category by counting the n	umber of billing	gs in that o	ategory (the n	umber o	of persons or or	ganizations		
	separately for the particular serv					•	,	we and the	
	Rate: Give the standard rate of unit in which it is generally billed	-	-					-	
	category, but do not include disc				y Stanua		is within a		
	Block 1: In the left-hand block	in space E, th	e form list	s the categorie					
	systems most commonly provide								
	that applies to your system. Not categories, that person or entity			0		0			
	subscriber who pays extra for ca								
	first set" and would be counted of								
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t with the number of subscribers a								
	sufficient.	and rates, in th	e nym-nai			e-word descrip		Service IS	
	BLC	DCK 1					BLOCK	< 2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RA
	Residential:				0,112				
	Service to first set		4	58.16					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA						•	
-	In General: Space F calls for ra				pect to a	Il your cable sy	stem's serv	vices that were	
F	not covered in space E, that is, t								
Services	service for a single fee. There ar furnished at cost or (2) services								
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the	rate column.	-	-		-		0	
ransmissions:	Block 1: Give the standard rat							twore not	
Rates	Block 2: List any services that listed in block 1 and for which a	• •			-	-	-		
	brief (two- or three-word) descrip				IOU. LIOU				
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		RY OF SERVI	CE	RATE	CATEG	ORY OF SERVICE	RA
	Continuing Services:		Installati	on: Non-resid	ential				
	• Pay cable	17.95	Motel	, hotel					
	Pay cable—add'l channel		• Comr	nercial					
	Fire protection		• Pay c	able					
	•Burglar protection		• Pay c	able-add'l char	nnel				
	Installation: Residential		•	rotection					
	First set	30.00	-	ar protection					
			Other se	rvices:					
	Additional set(s)								
	• FM radio (if separate rate)		• Reco			30.00			
	.,		• Disco	nnect					
	• FM radio (if separate rate)		• Disco • Outle			30.00 30.00 30.00			

ccounting Period: 2	2020/2			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
Munic	Zito Midwest LLC			7035
	PRIMARY TRANSMITTERS:			
G	carried by your cable system	ntify every television station (including n during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting ti	t (1) stations carried only on a part-tir	ne basis under
Primary		e)(2) and (4), or 76.63 (referring to 76.6	61(e)(2) and (4))]; and (2) certain station	ons carried on a
Transmitters: Television	Substitute Basis Stations	s explained in the next paragraph. : With respect to any distant stations c	arried by your cable system on a subs	stitute program
	• Do not list the station here station was carried only on			
	basis. For further informatic	also in space I, if the station was carrie on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p	, see page (v) of the general instruction	ons.
		with a station according to its over-the		
	"WETA-2" as the same on t Column 2: Give the channe	he form. el number the FCC assigned to the tele		
		RC is channel 4 in Washington, D.C. case whether the station is a network	station, an independent station, or a	noncommercial
	educational station, by ente	ring the letter "N" (for network), "N-M"	(for network multicast), "I" (for indepe	ndent), "I-M"
		"E" (for noncommercial educational), o erms, see page (iv) of the general instru		nal multicast).
		n of each station. For U.S. stations, list		s licensed by the
	FCC. For Mexican or Canad	dian stations, if any, give the name of t	he community with which the station i	s identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KCEN	6.1	N	Temple TX
	KCEN	6.2		Temple TX
Rows as Necessary	KNCT	46.1	I	Waco TX
	KNCT	46.2		Waco TX
	кwкт	44.1	N	Waco TX
	кwтх	10.1	N	Waco TX
	кwтх	10.2	Ι	Waco TX
	KXXV	25.1	Ν	Waco TX
	KXXV	25.3	Ι	Waco TX
		•		

EGAL NAME O		CABLE 3						SYSTEM 70
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) n the basis of for detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou rm. dentify the call tate whether t the radio stati this by placing sive the station	y the sys be recei it the Co sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under (tem whenever it is received a ved at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process < mark in the "S/D" column. on (the community to which the the community with which the	It the system's he system's FM ante this point, see par sed by the cable s ne station is licens	adend, and (2 nna, during co ge (v) of the g ystem as a se sed by the FC) it can l ertain st eneral ir eparate a	be expected, ated intervals. hstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	od: 2020/2						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYSTE	EM:					SYSTEM ID#
Name	Zito Midwest LLC							7035
	SUBSTITUTE CARRIAG	E: SPECIAL	STATEME	NT AND PROGRAM LO	OG			
I	In General: In space I, ident substitute basis during the a	accounting peri	iod, under sp	pecific present and former l	FCC rules, reg	ulations, o	r authorization	ns. For a further
Substitute Carriage:	explanation of the programm	•			the general in:	Structions	n the paper o	A 1-2 10111.
Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 	-	cable syster	n carry, on a substitute ba	asis, any noni	network te	levision prog	ram
Program Log	broadcast by a distant sta	ation?					YES	× NO
	Note: If your answer is "No	o", leave the re	est of this pa	ige blank. If your answer i	is "Yes," you i	nust com	plete the proc	aram
	log in block 2.	,		5	, ,			
	2. LOG OF SUBSTITUTI		IS					
	In General: List each subs			ate line. Use abbreviation	ns wherever p	ossible, if	their meaning	g is
	clear. If you need more spa							-
				vision program ("substitut				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.			etball. Elst specific progr		zzampie,	I LOVE LUCY	01
			cast live, ent	er "Yes." Otherwise enter	"No."			
				asting the substitute prog				
			(the community to which the		,	the FCC or,	in
	the case of Mexican or Car			stem carried the substitut			ale with the r	nonth
	first. Example: for May 7 gi	,	men your sy		e program. O	se numera	ais, with the f	nonun
			substitute pr	ogram was carried by you	ur cable syste	m. List the	e times accura	ately
	to the nearest five minutes.	. Example: a p	program car	ried by a system from 6:0	1:15 p.m. to 6	:28:30 p.r	n. should be	
	stated as "6:00–6:30 p.m."							
				n was substituted for proc				
			ns in ellect d		oa, enter the l		i the listed pr	ogram
		nming that vo		uring the accounting peri-		and requ		
				as permitted to delete un		and regu		
	effect on October 19, 1976					and regu		
	effect on October 19, 1976		our system w	as permitted to delete un	der FCC rules	and regu N SUBST	Iations in	7. REASON FOR
	effect on October 19, 1976	UBSTITUTE	PROGRAM	as permitted to delete un	der FCC rules	N SUBST	Iations in	7. REASON FOR DELETION
	effect on October 19, 1976	UBSTITUTE	pur system w	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAM	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAM	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
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	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
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	effect on October 19, 1976	UBSTITUTE	PROGRAN	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
	effect on October 19, 1976	UBSTITUTE	PROGRAM	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	
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	effect on October 19, 1976	UBSTITUTE	PROGRAM	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST AGE OCO 6.	IIAtions in TITUTE CURRED TIMES	

Accounting Period:	2020/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito Midwest LLC	S`	YSTEM ID# 7035
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service amount, see	2,619.95 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	this six-mon	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1		
	1. Base amount under statutory formula		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period:	2020/2		FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE S Zito Midwest LLC	YSTEM:	SYSTEM ID# 7035
M Channels	to its subscribers, and (2) the cable1. Enter the total number of channel system carried television broadcas2. Enter the total number of activate on which the cable system carried	t stations	9
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED we can contact about this statement	IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom of account.)	
for Further Information	Name Teri McMulle	n Telephone	814-260-0434
	Address PO Box 665 (Number, street, rural Coudersport (City, town, state, zip)		
	Email teri.me	cmullen@zitomedia.com Fax (optional)	
O Certification	 I, the undersigned, hereby certify the (Owner other than corport (Agent of owner other that in line 1 of space B and X (Officer or partner) I am in line 1 of space B. I have examined the statement of adot 	Account must be certified and signed in accordance with Copyright Office regulations) at (Check one, <i>but only one</i> , of the boxes.) ration or partnership) I am the owner of the cable system as identified in line 1 of space an corporation or partnership) I am the duly authorized agent of the owner of the cable d that the owner is not a corporation or partnership; or an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as o scount and hereby declare under penalty of law that all statements of fact contained here best of my knowledge, information, and belief, and are made in good faith. $\underbrace{X} /s/James Rigas$ Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	e B; or e system as identified wner of the cable system
	Typed Title:	or printed name: James Rigas President	
	Date:	(Title of official position held in corporation or partnership) 02/26/2021	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

AL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 8.
	SYSTEM ID#
o Midwest LLC	7035
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
YES. Enter the total here and list the satellite carrier(s) below	
	_
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
x 1%	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
xdays	_
	_
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	
x days Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 - Line 4 Multiply line 3 by 0.00274** and enter here - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	
x days Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 x 0.00274	
x days Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 - Line 4 Multiply line 3 by 0.00274** and enter here - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here - Line 3 Multiply line 2 by the number of days late and enter the sum here - k - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. For further assistance please	
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here - k - k - k - k 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 - k - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
x	
x	

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